## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

**Application or Docket Number** 

						•			- 1				
		CLAIMS AS FILED - PART I											*
L				olumn 1)		(Column 2)		SMALL E	NTITY		OI		ER THAN L ENTITY
U	.S. NATION,	AL STAGE FEE	S					RATE	T	FEE	7	RATE	
B/	ASIC FEE		SMALL	SMALL ENT. = \$ 150		RGE ENT. = \$ 300	1	BASIC FEE	+		٠,	R BASIC FEE	FE
EXAMINATION FEE			Satisfies F	Satisfies PCT Article 33(1)- (4) = \$50 / \$ 100		other situations = \$100 / \$200	1	EXAM. FEE	+-	<u> </u>	- 1		300
SE	ARCH FEE		U.S. is ISA ALL oth	U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400		other situations = \$ 250 / \$ 500		SEARCH FE			1	EXAM. FEE	200
FE	E FOR EXTR	A SPEC. PGS.		minus 100 =		/ 50 =	1	V 6 405	+-		1	SEARCH FE	400
ГО	TAL CHARGE	EABLE CLAIMS	19	<del></del>				X \$ 125 :			-	X \$ 250	=
— NE	EPENDENT	CLAIMS	1,7					X \$ 25 =			OR	X \$ 50 =	
	<del></del>	ENDENT CLAIM P	PESENT	2 minus 3 = ,			ŀ	X \$ 100 =			OR	X \$ 200 =	
_								+ \$ 180 =			OR	+ \$ 360 =	
		oc ar column 1 1	s iess than 2	ess than zero, enter "0"		in column 2		TOTAL		1	OR	TOTAL	
		CLAIMS AS (Column 1)	AMEND	ED - PART				SMALL	<b>5</b> 11717			OTHER	
AMENDIMENT A		CLAIMS		HIGHE	ST	ST .		SWALL	ENIII	Y ———	OR	SMALL	ENTITY
		REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID F	JSLY	PRESENT EXTRA		RATE	ADI TION FE	IAL		RATE	ADDI- TIONAL FEE
	Total	1.13	Minus	**		=	ſ	X \$ 25 =			OR	X \$ 50 =	
	Independent	٠ 2	Minus	***		=		X \$ 100 =	<b> </b>	7	OR	X \$ 200 =	<del> </del>
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIR				AIM		ľ	+ \$ 180 =	<del> </del>	-	OR	+ \$ 360 =	
		•					Ļ	TOTAL ADDIT.			L	TOTAL ADDIT.	
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1		(Column 1) CLAIMS		(Column HIGHES		(Column 3)							
ŀ		REMAINING AFTER AMENDMENT		NUMBER PREVIOUS PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI TIONA FEE	L		RATE	ADDI- TIONAL
	rotal	*	Minus	**	·	=	r	X \$ 25 =		-	DR -	X \$ 50 =	FEE
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	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA				IM.		$\vdash$	+ \$ 180 =	· 	-	-	X \$ 200 =	
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								FEE L		<b>_</b> 1	R T	FEE	
<b>.</b>		g.'											
	and inducation	mn 1 is less than the mber Previously Paid mber Previously Paid	FAM IN THIS C	DACE to loss 45 -	umn 3								

If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".